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Applicability: Contracted Providers of Service Coordination

In order to provide quality Service Coordination to those served by the Department of Disabilities and Special Needs, this directive establishes and defines the levels of DDSN Service Coordination and outlines the procedures for determining and implementing the appropriate level for people. The policy focuses on serving those people in greatest need, empowering people and their families to be advocates and using resources in the most efficient way possible.

I. Service Coordination

Service Coordination is defined by Medicaid policy as the coordination of services to assure that people have access to a full array of needed services, thereby preventing the need for institutionalization or more costly services or interventions. When providing Service Coordination, it is expected that the Service Coordinator actively identify needs and resources, actively coordinate services to meet those needs, and actively monitor those services over time to assure that they continue to be necessary and appropriate. When active and on-going interventions from a Service Coordinator are required in order to access needed services, Level I Service Coordination services should be provided. However, for those who do not require the active and ongoing interventions of a Service Coordinator in order to access needed services, Level II Service Coordination is available.

II. Levels of Service Coordination

Service Coordination is provided to those eligible for DDSN services according to their *level of need*. The level of need will be determined by the service coordinator based on available information. It is the responsibility of the service coordinator (SC) to:

- identify needs in various areas of the person's life;
- determine in general the importance of those needs;
- determine the resources available to the person;
- determine the probable frequency and intensity of effort required to address those needs;
- assess the person's/legal guardian's capacity to advocate for his/herself;
- conclude whether the person's needs can be met through the implementation of Level I Service Coordination or Level II Service Coordination.

The **Level I/Level II Service Coordination Assessment** must be completed:

1. Within forty-five (45) days of being determined eligible for DDSN services.
2. No more than three (3) days prior to transitioning from Early Intervention to Service Coordination; and/or
3. No more than three (3) days prior to moving from one Service Coordination Level to another.

(See Attachment A for the Level I/Level II Service Coordination Assessment)

DDSN does not provide active or comprehensive service coordination when there is no need for it. While no one is required to receive Service Coordination, certain DDSN services can only be accessed through the involvement of a Service Coordinator /Early Interventionist (SC/EI) (e.g., Home and Community Based Waiver services). Those persons in the most difficult circumstances and with the most complex needs require the greatest intervention from service coordination.

III. Level I Service Coordination

Level I Service Coordination is DDSN's most comprehensive level of service coordination and is reserved for those with the greatest need. Level I Service Coordination begins when intake is initiated for DDSN eligibility determination and the case is opened on the Consumer Data Support System (CDSS). However, the person cannot receive the full range of service coordination activity until DDSN eligibility is determined. If the person's needs can be addressed by a one-time or short-term intervention by the service coordinator, the person may be placed on Level II Service Coordination after he/she is determined eligible for DDSN services (see Section IV).

When someone receives Level I Service Coordination, the SC must report appropriate activity (refer to the Service Coordination Standards for explanations on appropriate activity) on the Service Provision Log (SPL). Those on Level I may be considered either in a billable or non-billable status. Level I Service Coordination

requires at least one annual face-to-face contact. For someone to receive Level I Service Coordination, an ongoing need for service coordination must be supported by documentation in his/her file.

The following circumstances are indicative of situations that would result in the need for ongoing and active interventions from a SC. Therefore, persons in one of these circumstances should receive Level I Service Coordination. Level I Service Coordination should be provided when someone:

1. is being determined eligible for DDSN services. (If this person's eligibility determination process has been ongoing for more than 6 months, this question may be answered "no").
2. has identified needs that will require the active and ongoing interventions of a Service Coordinator or Early Interventionist to address. Such interventions may be required due to the person's need for intensive treatment or services, parent/caregiver with limited skills or with a disability who is unable to provide adequate care/supervision of services and needs, the person's undiagnosed condition requiring further evaluation, the person's current or recent involvement in a volatile or possibly abusive, neglectful, or dangerous situation, etc.
3. is in a critical situation (i.e., his/her name is on DDSN critical waiting list).
4. is currently enrolled in the MR/RD, HASCI, PDD or Community Supports Waiver.
5. lives in an alternative placement or a DDSN supported placement other than an ICF/MR.
6. is being concurrently served by DJJ.
7. has medical (including genetic) conditions that require consistent, coordinated care by general or specialty physicians, therapists, and other allied health professionals and needs the active and ongoing interventions of a Service Coordinator regarding those services.
8. is currently experiencing health risk indicators such as uncontrolled high blood pressure or unmanaged diabetes and their primary care physician is not managing care.
9. has expressed health or safety concerns that neither they nor others have been able to resolve, that they appear not to have recognized or are not addressing or refusing to address.
10. is engaging in behaviors with serious health, safety, or legal consequences.
11. is a threat to the health and safety of others.
12. is experiencing circumstances that are a threat to his/her current living situation (such as behavioral issues or lack of supervision), or that threaten the continuation of care in the near future by the primary caregiver (such as health or aging issues).
13. NOTE: In the event of an adverse report, DDSN may require Level I Service Coordination for persons residing in non-board operated CRCFs or nursing homes.

IV. Level II Service Coordination

Someone should be considered for Level II Service Coordination if there is:

- no need for active, ongoing interventions from a Service Coordinator (Level I Service Coordination);
- the person requests not to have Level I Service Coordination (and they do not fall into any of the categories Section III, #1-12);
- the person is enrolled in the Community Choices Waiver, the HIV/ AIDS Waiver or the Mechanical Ventilator Waiver;
- the person is served by an agency for whom SCDDSN is the concurrent case manager under the DHHS hierarchy, or
- the person cannot be located after at least three documented legitimate attempts to do so (One of those attempts should be a letter by certified mail to the person's last known mailing address. A legitimate attempt would not include, for example, calling the same telephone number three times in a single day or calling on a day or at a time that the records would indicate that no one is likely to be home. A legitimate attempt might include, but not be limited to, calling on various days or times of day with a reasonable expectation that the person or other knowledgeable person might be present, home visits, calling new telephone numbers obtained from past service providers or others who know the person, or calling a known family member not listed on the CDSS as a contact person.

People receiving Level II Service Coordination can expect, at a minimum, an annual contact from a SC or other designated provider staff person. Annual contact is defined as completing a contact with the person within 365 days of movement from Level I to Level II Service Coordination (which is the date the SC Supervisor signed the Agreement Form) or within 365 days from the last annual contact (if the person has already been on Level II for more than a year). Each annual contact should include a determination of the person's current condition including health status, any changes in contact information, determination of whether Level II Service Coordination continues to be appropriate, offering a choice of alternative services and providers, and updating the 'Agreement for Level II Service Coordination' form if necessary. All of the above activity should be thoroughly documented in a service note, and reported on the SPL in a non-billable status. The CDSS/STS must also be updated as appropriate. (Note: Annual contact is not required for persons on "optional" or "inactive" status if the person was on such status prior to July 1, 2003.)

Other than an annual contact, NO quarterly monitoring or plan development will be required for those on Level II.

If one-time or short-term needs arise for persons on Level II status, it is not necessary for the person to be placed on Level I status. The SC should address the immediate needs, document his/her actions in a service note, and update the CDSS as necessary. A Plan or Plan Amendment is not required if addressing one-time or short-term needs. The needs of persons receiving Level II Service Coordination must be given as much consideration as the needs of persons receiving Level I Service Coordination.

If someone on Level II Service Coordination requests a Waiver slot, application for the slot must be made in accordance with applicable Home and Community Based Waiver policy.

Please Note: Although no billing can be done for any activity conducted on behalf of someone on Level II status, all activity should be reported on the SPL in a non-billable status. (Those on Level II will not show up on the monthly SPL, therefore, their names will have to be added whenever reporting any type of activity.) However, if a reportable activity was completed earlier in the same month in which the person is being transferred to Level II, the SC can bill for that activity. It is important that SC's check SPLs for accuracy and bill for anyone in that month prior to changing to Level II Service Coordination.

V. Procedures for Placing Someone on Level II Service Coordination

When, based on the results of the Level I / Level II Service Coordination Assessment, Level II Service Coordination is determined to be appropriate, the SC will discuss with and offer the option of Level II Service Coordination to the person/legal guardian. This discussion of Level II status will be during a face-to-face contact preferably during a home visit. When warranted, this discussion will also take place with or in the presence of others who know the person well, such as family. During the discussion, the SC will provide information describing both Level I and Level II Service Coordination, who and how to contact the provider should needs arise while on Level II status, and the conditions necessary for a return to Level I status. The person/legal guardian will be told to expect an annual contact by a SC or other provider staff. The person/legal guardian will be asked to notify the provider when they incur changes in address or telephone number and whenever they feel they have a need for service coordination assistance.

If the provider feels that Level I Service Coordination is no longer appropriate but the person/legal guardian disagrees, they should be informed of his/her right to question the decision according to procedures defined by DDSN's 535-08-PD, Concerns of People Who Receive Services: Reporting and Resolution.

If the provider and the person/legal guardian mutually agree that Level II Service Coordination is appropriate, they will review and sign two copies of the Agreement for Level II Service Coordination form (Attachment B). An original signed copy of the form will be provided to the person/legal guardian at the time of signing. NOTE: If legitimate but unsuccessful attempts were made to locate the person and any legal guardian, the above form should be completed in its entirety except for the person/legal guardian's signature. The person may then be placed on Level II status with adequate documentation in the service notes.

An original signed copy of the form will also be signed by the service coordination supervisor and filed in the person's record. The date of the supervisor's signature is the effective start date for Level II Service Coordination.

If on Level II Service Coordination status, children under age 18, adults who have been adjudicated incompetent or those in the custody of another party must have the current legal guardian's signature on the Service Agreement and the Agreement for Level II Form. If there is a change in guardianship, then a new Service Agreement and Agreement for Level II Service Coordination form must be signed within 30 days of the change. For those turning 18 years old, or for competent adults who have a

name change, a new Service Agreement and Agreement for Level II Form should also be signed by the person within 30 days of the change.

If the Level I / Level II Service Coordination Assessment shows no need for on-going, active intervention from a SC but both the person and the provider wish for Level I Service Coordination to be provided, a request for exception must be submitted to and approved by the SCDDSN Service Coordination District staff. As appropriate, District staff will consult with Central Office Program staff (e.g., Autism Division Staff, HASCI Division staff, and Children's Services staff) regarding the request.

The SC will write a service note(s) documenting the meeting with the person/legal guardian including their choice of or objection to Level II Service Coordination and documenting any activities or communications that followed those decisions.

VI. Procedures for Entering Information on the CDSS/STS

Once a person/family has agreed to be transferred to Level II Service Coordination and the SC supervisor has signed the Agreement for Level II Service Coordination, the service coordination provider agency is responsible to update the CDSS/STS within 5 working days. All personal information should be updated and current including demographic information and primary contacts. Also, SC's need to review and make sure that any billable activities that occurred prior to the transfer to Level II is reported prior to changing the CDSS to Level II status.

To change the service coordination status on the CDSS, the service coordination provider will need to access the 'CDSS Navigation Menu', select 'CDSS Consumer Menu' and select 'Service Coordination Level' under 'Status'. When the 'Service Coordination Level' screen is displayed, the service coordination provider will need to enter the correct indicator level and the effective (begin) date of transfer to Level II. The effective date will be the date that the SC Supervisor signed the Agreement form, unless otherwise directed by DDSN. **Note:** The blank or vacant indicator level indicates that the person is on 'Inactive' (formerly 'Optional') status.

Once someone is placed on Level II Service Coordination, the service coordination provider agency will continue to be responsible for maintaining current and accurate demographic and contact information on CDSS as they become aware of any changes. Changes in program information will NOT be the responsibility of the service coordination provider agency.

If it becomes necessary for someone to be transferred from Level II Service Coordination to Level I the same procedures above will need to be followed to update the CDSS. These changes will need to be made within 5 working days of the decision to transfer the person, and the effective date will be the date the person/family, SC and supervisor made the decision to return to Level I.

VII. Procedures for Annual Contact

Annual contact is defined as completing a contact with the person within 365 days of movement from Level I to Level II Service Coordination (which is the date the SC

Supervisor signed the Agreement Form) or within 365 days from the last annual contact (if the person has already been on Level II for more than a year). Prior to calling the person and/or family for the annual contact, the SC or other provider staff person will review the last service note and the most recent plan. The purpose of this prior review is to help ensure some degree of familiarity with the person and familiarity with issues that were known to have affected the person at the time of placement on Level II status.

Also, prior to making an annual contact with the person/family, the service coordination provider agency will be responsible to make an annual contact with any DDSN funded service providers that are providing services to the person, to gather information about the current progress of the person, to identify any potential needs, and to verify that Level II Service Coordination continues to be appropriate. These annual contacts must be documented in the service notes and reported on the SPL in a non-billable status.

The staff person will verify the person's current address and most appropriate telephone number, the address and telephone number for any legal guardian, and the primary contact person's address and telephone. It is suggested that open-ended questions be asked during the contact with particular attention paid to any health issues.

Based on responses to the questions or based on information gleaned during the course of the contact, the staff person will need to determine the appropriateness of the continuation of Level II Service Coordination. If the information gleaned from the conversation indicates that the circumstances have changed and now the person is experiencing one of the following, then transfer to Level I must be made:

1. The person's DDSN eligibility is being determined. (If this person's eligibility determination process has been ongoing for more than 6 months, this question may be answered "no").
2. The person has identified needs that will require the active and ongoing interventions of a Service Coordinator or Early Interventionist to address. Such interventions may be required due to the person's need for intensive treatment or services, parent/caregiver with limited skills or with a disability who is unable to provide adequate care/supervision of services and needs, the person's undiagnosed condition requiring further evaluation, the person's current or recent involvement in a volatile or possibly abusive, neglectful, or dangerous situation, etc.
3. The person is in a critical situation (i.e., his/her name is on DDSN critical waiting list).
4. The person is currently enrolled in the MR/RD, HASCI, PDD or Community Supports Waiver.
5. The person lives in an alternative placement or a DDSN supported placement other than an ICF/MR.
6. The person is being concurrently served by DJJ
7. The person has medical (including genetic) conditions that require consistent, coordinated care by general or specialty physicians, therapists, and other allied health professionals and needs the active and ongoing interventions of a Service Coordinator regarding those services.

8. The person is currently experiencing health risk indicators such as uncontrolled high blood pressure or unmanaged diabetes and their primary care physician is not managing this care.
9. This person/guardian has expressed health or safety concerns that neither they nor others have been able to resolve, that they appear not to have recognized or are not addressing or refusing to address.
10. The person is engaging in behaviors with serious health, safety, or legal consequences.
11. The person is a threat to the health and safety of others.
12. The person is experiencing circumstances that are a threat to his/her current living situation (such as behavioral issues or lack of supervision), or that threaten the continuation of care in the near future by the primary caregiver (such as health or aging issues).

If one-time or short-term intervention by a SC may address the issue(s) or may enhance the person's/legal guardian's capacity to cope, then Level II Service Coordination may still be appropriate.

If there is an obvious need for active and ongoing, comprehensive service coordination and the person/legal guardian expresses a desire for service coordination or a desire for help, then Level I Service Coordination is needed. If ongoing service coordination is warranted by identified needs and if the person/legal guardian is in agreement, the staff person should discuss the issues with the service coordination supervisor. If the supervisor is in agreement, the person will be moved to Level I status by the assigned service coordinator.

If someone is to remain on Level II status, the SC/staff making the annual contact will review the current "Agreement for Level II Service Coordination" form to determine if there are any changes in the contact information. If there are no changes, the SC/staff can sign and date the current form and document in a service note that this was discussed with the person/family. If there are changes, a new Agreement for Level II Service Coordination form must be sent to the family with the current contact information. If a new form is sent, this form does not have to be signed by the person/family unless there is no previously signed agreement on file.

If someone on Level II status cannot be located for the annual contact after three legitimate attempts, the case may be closed.

If the person can be located, but the person/legal guardian does not wish to have the annual contact, the person/legal guardian will be asked if they want the case to be closed. If so, the implications of closure must be explained, then the case may be closed.

Regardless of the outcome of the annual contact or the attempted contact, the staff person should provide a detailed summary in the service notes. (Please note: stating that "Everything is fine." is not sufficient). Also, as part of the annual contact, service coordination provider agencies will be responsible for updating the CDSS if there are any changes in the demographic, primary contact, or other contact information.

VIII. Procedures for Returning Someone to Level I Service Coordination

When it is determined that someone should return to Level I Service Coordination, the following actions must occur:

- CDSS must be updated to indicate Level I status and make demographic and other changes. (Note, CDSS must reflect the change within 5 working days of the date the SC, person/family, and the appropriate supervisor determine that Level I is needed.)
- When a person on a service coordination caseload is moved from Level II to Level I on CDSS, the support plan is due 45 days from the effective begin date of the move to Level I. The 45 day due date will be “enforced” on CDSS by alert messages that the plan is due and eventually overdue. These messages cannot be removed from CDSS until a complete new assessment and plan is entered on CDSS.
- All activity and contacts must be documented in service notes and on the SPL.

IX. Procedures for Transferring EI Children into Level I & Level II

For children ages 3-6 who are transferring to Service Coordination, it is the Early Interventionist’s responsibility to complete the Level I/Level II Service Coordination Assessment to determine the level of need and the level of service coordination that will be required. This assessment will determine if the child will be transferred directly into Level II Service Coordination or due to needs which require on-going active intervention by the SC, will be transferred to Level I Service Coordination. Prior to transferring a child, the Early Interventionist must offer the family a choice of service coordination providers. The Early Interventionist will obtain the parent/guardian’s signature on the Acknowledgement of SC/EI Choice form to document their choice of providers.

If a child is identified as having needs that require active and ongoing intervention from a SC, they must be transferred into Level I Service Coordination. Children that are transferred directly into Level I Service Coordination will be transferred with their current Family Support Plan (FSP) in place for a period up to 45 days from the date of new caseworker assignment. The service coordination support plan is due no later than 45 days from the effective begin date of the new caseworker assignment. For children age 3 with a current Individual Family Support Plan (IFSP), the Early Interventionist will be responsible for completing a FSP prior to their transfer to Level I Service Coordination.

If a child is transferred directly into Level II Service Coordination, the child will enter Level II Service Coordination with their current FSP in place. In the case of 3 year-olds, they are NOT permitted to have an IFSP on or after their 3rd birthday; therefore, the Early Interventionist must complete an FSP on or before the child’s 3rd birthday. Once a current FSP is in place, the child can be transferred to Level II Service Coordination. Prior to their transfer, the Early Interventionist must offer the family the choice of service coordination providers. Once the family has chosen a provider, the chosen service coordination provider agency will need to meet with the family to explain Level II Service Coordination, the contact requirements, contact information

for the agency in the event that a need arises, and to obtain the family's signatures on the Agreement for Level II Service Coordination form. Once the form is signed by the service coordination supervisor, the child can then be entered on the CDSS as being on Level II status. The chosen service coordination provider agency will then be responsible for completing an annual contact with the person/family within 365 days of the date of transfer to Level II, and to complete an annual contact with any current DDSN funded or QPL program providers. The service coordination provider agency will also be responsible for keeping all demographic and contact information current on the CDSS.

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Please find the following attachments on the agency's website under "Attachments to Directives" under this directive number.

Attachment A Level I/Level II Service Coordination Assessment

Attachment B Agreement for Level II Service Coordination